

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2001

Application or Docket Number

60208-350901

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

TOTAL CLAIMS	<i>25</i>	<input type="checkbox"/>
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	<i>25</i> minus 20=	* <i>5</i>
INDEPENDENT CLAIMS	<i>2</i> minus 3 =	* <i>0</i>
MULTIPLE DEPENDENT CLAIM PRESENT	<input type="checkbox"/>	

SMALL ENTITY TYPE	<input type="checkbox"/>	OTHER THAN SMALL ENTITY
RATE	FEE	RATE
BASIC FEE	370.00	BASIC FEE
X\$ 9=	<i>45</i>	740.00
X42=	<input type="checkbox"/>	X\$18=
+140=	<input type="checkbox"/>	X84=
TOTAL	<i>415</i>	+280=
OR	<input type="checkbox"/>	TOTAL

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

SMALL ENTITY	<input type="checkbox"/>	OTHER THAN SMALL ENTITY
RATE	ADDI- TIONAL FEE	RATE
X\$ 9=	<input type="checkbox"/>	X\$18=
X42=	<input type="checkbox"/>	X84=
+140=	<input type="checkbox"/>	+280=
TOTAL ADDT. FEE	<input type="checkbox"/>	TOTAL ADDT. FEE
OR	<input type="checkbox"/>	OR

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=	<input type="checkbox"/>	X\$18=	<input type="checkbox"/>
X42=	<input type="checkbox"/>	X84=	<input type="checkbox"/>
+140=	<input type="checkbox"/>	+280=	<input type="checkbox"/>
TOTAL ADDT. FEE	<input type="checkbox"/>	TOTAL ADDT. FEE	<input type="checkbox"/>
OR	<input type="checkbox"/>	OR	<input type="checkbox"/>

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=	<input type="checkbox"/>	X\$18=	<input type="checkbox"/>
X42=	<input type="checkbox"/>	X84=	<input type="checkbox"/>
+140=	<input type="checkbox"/>	+280=	<input type="checkbox"/>
TOTAL ADDT. FEE	<input type="checkbox"/>	TOTAL ADDT. FEE	<input type="checkbox"/>
OR	<input type="checkbox"/>	OR	<input type="checkbox"/>

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.